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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/661,919	09/12/2003	William J. Taylor	P-8059.00	8345	
27581 MEDTRONIC	7590 06/05/2007		EXAMINER		
MEDTRONIC, INC. 710 MEDTRONIC PARKWAY NE			STOKLOSA, JOSEPH A		
MINNEAPOLI	IS, MN 55432-9924		ART UNIT PAPER NUMBER		
			3762		
			MAIL DATE	DELIVERY MODE	
			06/05/2007	PAPER	

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

	Application No.	Applicant(s)	
Interview Commons	10/661,919	TAYLOR ET AL.	
Interview Summary	Examiner	Art Unit	
	Joseph Stoklosa	3762	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>Joseph Stoklosa</u> .	(3) <u>Carol F. Barry</u> .		
(2) <u>George Evanisko</u>	(4)		
Date of Interview: <u>5/24/2007</u> .			İ
Type: a)⊠ Telephonic b)□ Video Conference c)□ Personal [copy given to: 1)□ applicant	2) applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.		
Claim(s) discussed: All in general, specifically claim 65.			
Identification of prior art discussed:			
Agreement with respect to the claims f) was reached.	g)□ was not reached. h)⊠ !	N/A.	
Substance of Interview including description of the general reached, or any other comments: <u>General discussion of the particularly with Claim 65.</u>	al nature of what was agreed to be invention and as it pertains	o if an agreement to the claims were	was e discussed,
(A fuller description, if necessary, and a copy of the amen allowable, if available, must be attached. Also, where no allowable is available, a summary thereof must be attached	copy of the amendments that v	reed would rende would render the o	er the claims claims
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE INTERVIEW. (See MPEP Section 713.04). If a reply to th GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INFILE A STATEMENT OF THE SUBSTANCE OF THE INTIRequirements on reverse side or on attached sheet.	e last Office action has alread; R OF ONE MONTH OR THIRT TERVIEW SUMMARY FORM,	y been filed, APPI Y DAYS FROM T WHICHEVER IS	LICANT IS HIS
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	ACABRE	R.EVANISKO	
		Y EXAMINER	
Examiner Note: You must sign this form unless it is an		5/24/7	
Attachment to a signed Office action.	Examiner's sign	nature, if required	